

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 032034-002000
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop <u>Amendments</u> , Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 703-872-9300 on May 3, 2005. Signature: <u>[Signature]</u> Name: <u>Sheshore Abdulkarim</u>	In re Application of: <u>Christian REITER</u>	
	Application Number: <u>10/089,452</u>	Filed: <u>January 27, 2003</u>
	For: <u>IMPROVED METHOD FOR THE DETECTION OF ACID RESISTANT MICROORGANISMS IN THE STOOL</u>	
	Group Art Unit <u>1645</u>	Examiner <u>N. MITCHELL</u>
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate entity fee are as follows (check time period desired): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) </div> <div> \$ _____ \$ _____ \$ _____ \$ _____ \$ <u>2160.00</u> </div> </div> <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____ <div style="display: flex; justify-content: space-between;"> <div> <u>[Signature]</u> Signature <u>Jeffrey A. Lindeman (Reg. No. 34,658)</u> Typed or printed name </div> <div> <u>May 3, 2005</u> Date <u>202-585-8000</u> Telephone Number </div> </div>		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.		

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